

INTRODUCTION

“Access to medicines is access to life”¹.

Availability, accessibility and affordability have an impact on the ability of the patient to obtain the essential medication¹. Locally, access to medications depends on two independent markets, the public and private sectors.

AIMS

- To analyse the Maltese patients’ access to medicines, including the insights of health care professionals and to highlight the associated risks involved.
- To consider the various measures utilised, such as existing web systems and free medicines entitlement schemes.
- To propose innovative ideas in order to improve the local scenario.

METHOD

A questionnaire was developed in order to gain insight from the general public regarding their access to medicines. A panel of experts were asked to validate the questionnaire thus providing suggestions and amendments. A *test-retest* reliability testing method was used using Kappa reliability test in order to measure the inter-rater reliability between the two raters for the same questionnaire.

The questionnaires were distributed to the out-patients and patients attending the day-care unit at Mater Dei Hospital. Quantitative data was collected following the distribution of questionnaires and focus group meetings with expertise in this area in order to gain knowledge from both the general public and the experts respectively, regarding access to medicines.

A focus group meeting was held with two pharmacists, an engineer and a financial controller. A focus group method was used to qualitatively collect knowledge regarding patient access to medications within the patient population. Therefore, using qualitative data as another source of data collection was found to be conducive to eliminate certain limitations.

An analysis of the risks involved resulting from the lack of access patients have to medications was carried out.

RESULTS

- Out of a total of 133 respondents, 83 were female and 50 were male, with the 41-50 year old age group being the most populated. Cardiovascular drugs were the most commonly consumed by the respondents showing a prominent peak between the age of 51-70 years (*Figure 1*).
- Patients benefiting from the free medications scheme amounted to 53.4% of the study population with 49.6% and 10.5% of those entitled possessing a yellow card and a pink card respectively.
- 48.9% of the subjects were not familiar with what generic medications were (*Figure 2*).
- The issues of international shortages, competition for resources, the demand greater than supply, an unsustainable distribution system, discrimination against diseases, overprescribing habits, language and transportation issues and average retail medicinal prices higher than in some European countries were discussed during the focus group.

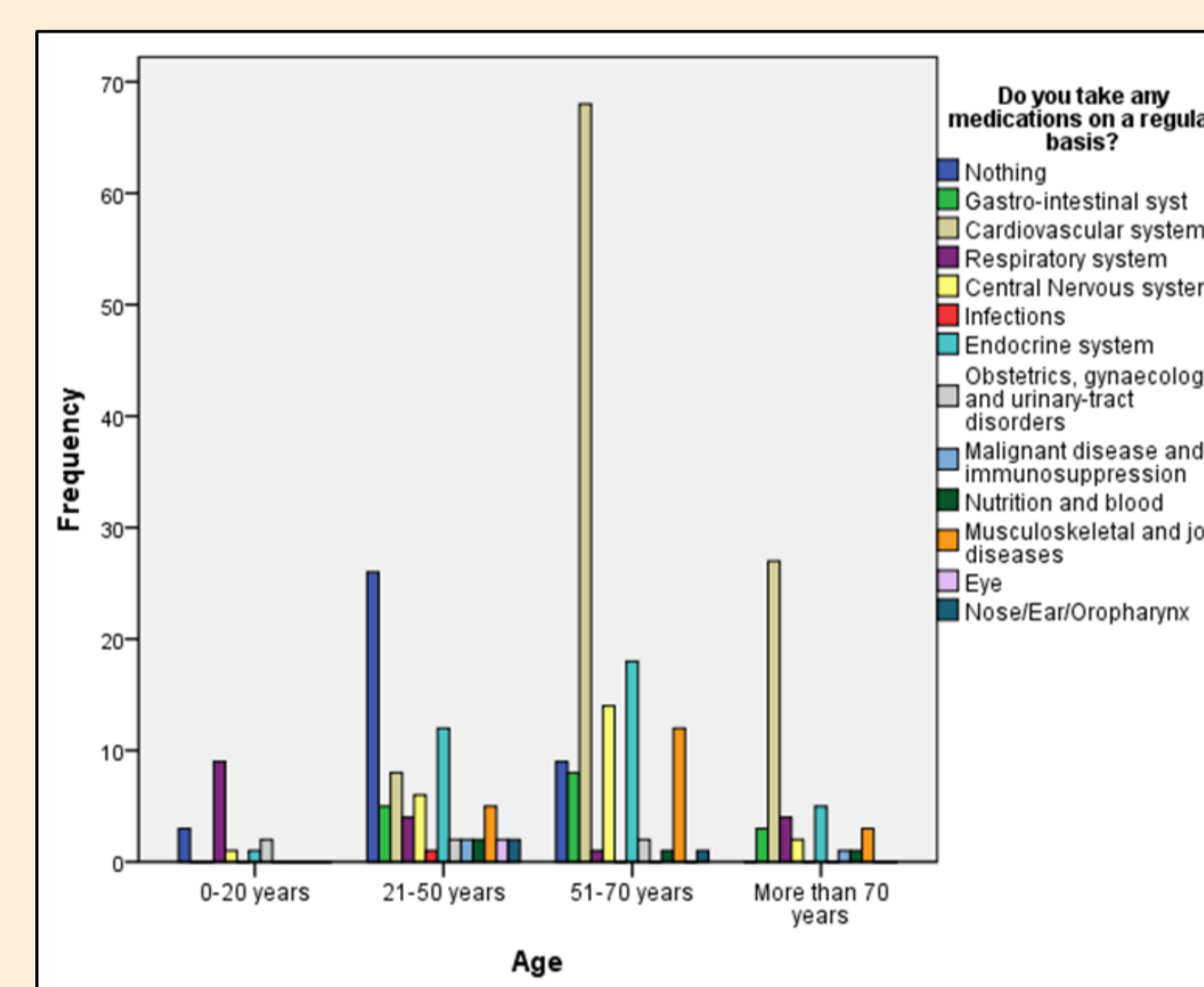


Figure 1: The different medications consumed by the respondents of the study (n=133)

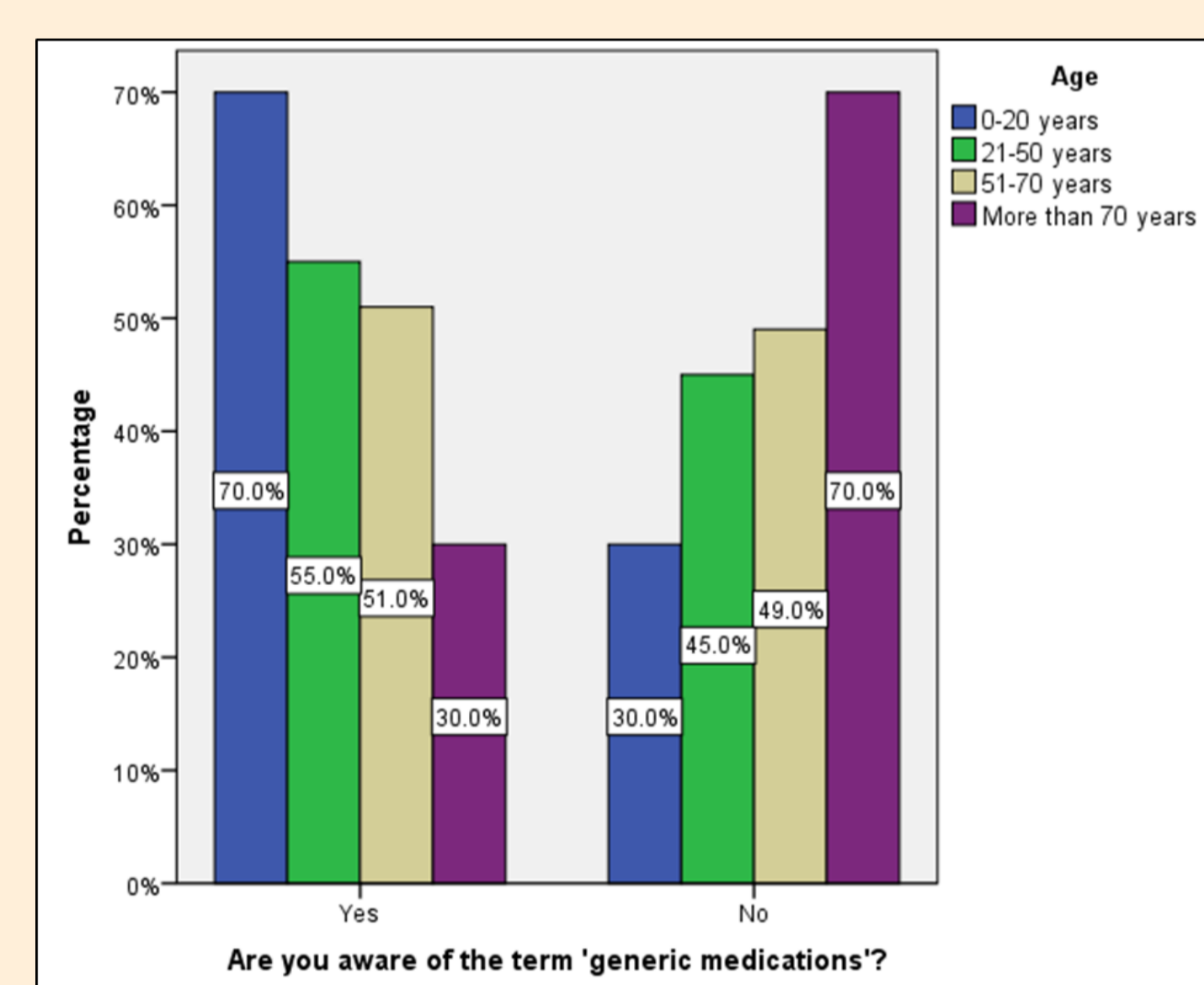


Figure 2: Knowledge regarding generic medicines in relation to age. (n=133)

CONCLUSION

Promoting the use of generic medications will lead to cost reductions, whilst choice, accessibility and affordability will be improved upon². Locally, air or sea travel are the only source of access to medications from nearest countries, since Malta is an island with no neighbouring countries. Most often, the language issue limits our access, therefore re-labelling of medicinal products is required, directly increasing the cost of medicinal products². Taking all of the above into consideration, one must ensure that risks must be kept to a minimum, in order to safeguard the patient.

References

1. National Medicines Policy and Audit Unit. Health Division Unit; [cited 2013 November 18]. Available from: URL: <http://www.sahha.gov.mt/pages.aspx?page=23>
2. Bugeja V. The impact of EU legislation on medicines in Malta: Journal of the Malta College of Pharmacy Practice. 2008; 14: 34-39.